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**Patent
Attorney's Docket No. 0119-076**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

**RESPONSE UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
Art Unit 2644**

John Philipsson et al.

Application No. 09/588,462

Examiner Jefferey Harold

Filing Date: 06/06/2000

Confirmation No. 9176

For: Loudspeaker Volume Range Control

RESPONSE

**Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Sir:

**In response to the final Office Action mailed on July 13, 2004, the following
Remarks are respectfully submitted.**

Remarks begin on page 2 of this paper.

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM	Application Number	09/588,462	RECEIVED CENTRAL FAX CENTER JAN 11 2005
	Filing Date	06/06/2000	
	First Named Inventor	John Philipsson	
	Art Unit	2644	
	Examiner Name	Jefferey Harold	
(To be used for all correspondence after initial filing)		Attorney Docket Number	0119-076
Total Number of Pages in This Submission		10	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, 30809090 <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-2038 for extension fee Statement under 37 CFR 3.73(b)
Remarks By facsimile to 1 703 872 9314		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Potomac Patent Group PLLC, P.O. Box 855, McLean, Virginia 22101-0855		
Signature	<i>Michael G. Savage</i>		
Printed name	Michael G. Savage		
Date	January 11, 2005	Reg. No.	32,596

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